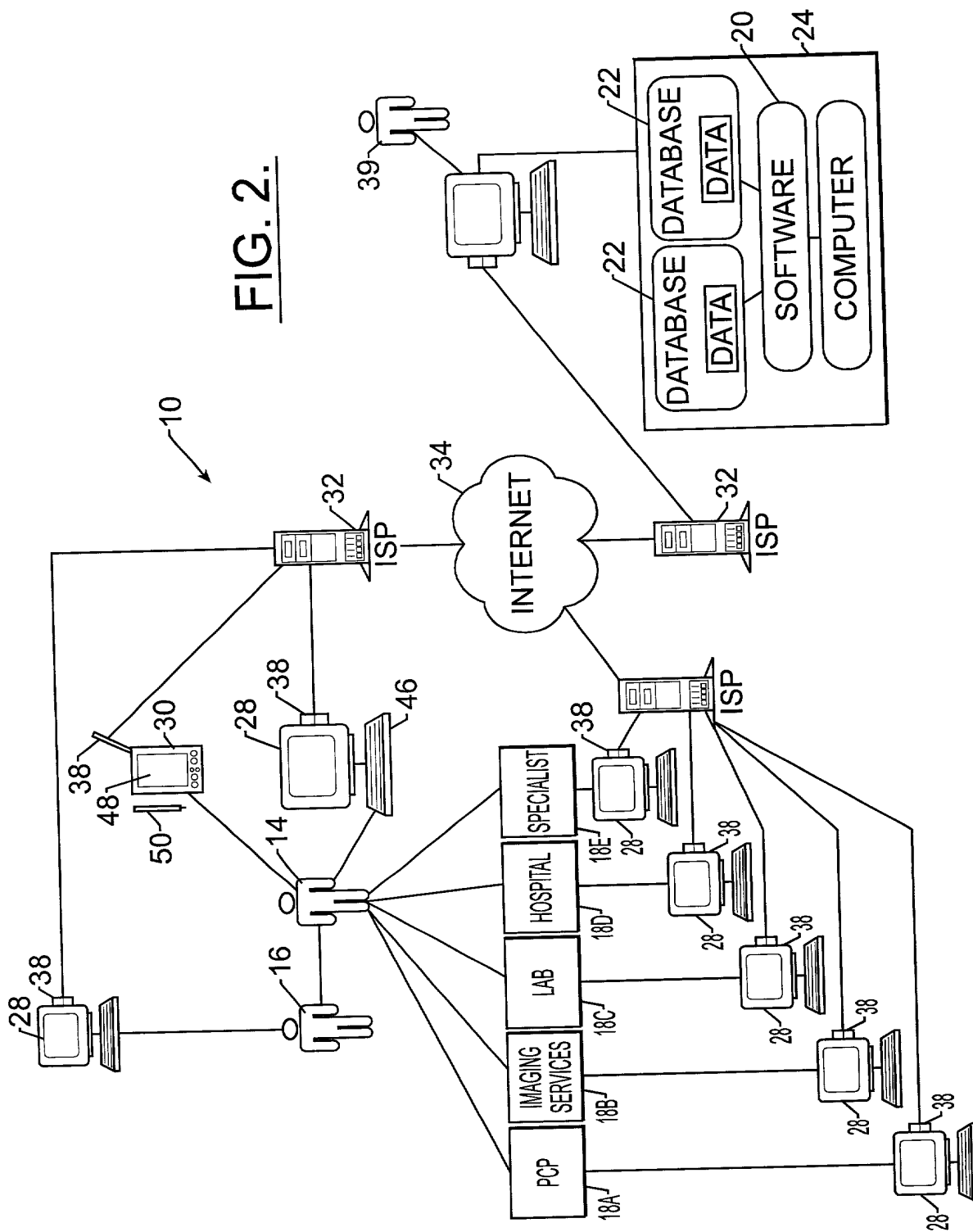


FIG. 1.



**FIG. 2.**

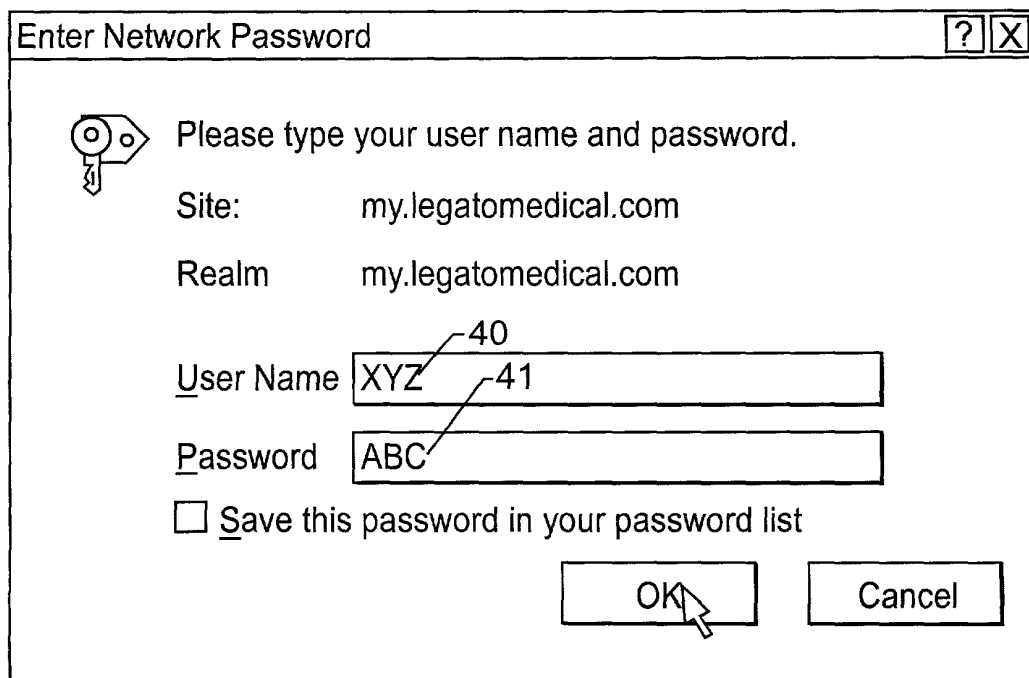


FIG. 3.

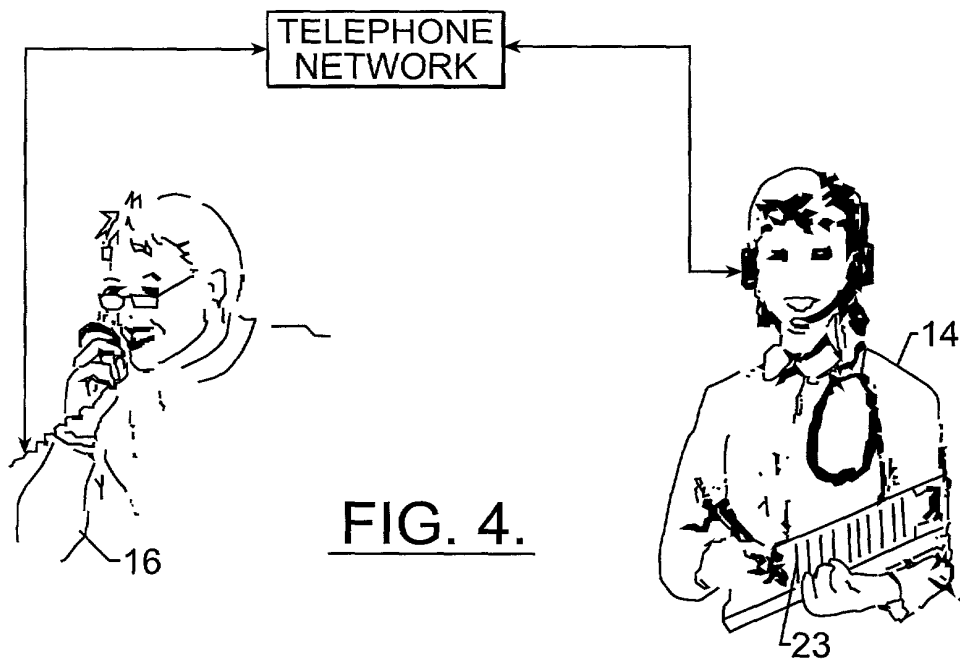


FIG. 4.

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## Patient Information

### Patient:

J Smith  
1111 Xyz Drive  
Nowhere, NC 00001  
Home Phone: (704) 111-2222  
Work Phone: (704) 111-1222  
email: jsmith@nowhere.com  
DOB: 01/01/67  
SSN: 100-10-1000  
Referring MD: Boggett, Clifford  
Current Treatment Track: not yet selected

1. Symptoms: Heartburn; Chronic sore throat; Hoarseness;
2. Occurrence: Daily
3. Length: 1-3 years
4. Medicines: tried Prilosec; tried Prevacid; tried Protonix; tried Aciphex; tried Nexium;
5. Previous Tests or Treatments:
6. Previous abdominal surgery: cholecystectomy;
7. Other medical problem (with medication):

The above information, as all information with the heartburn treatment center, is considered privileged and confidential. It is intended solely for the use of the individual to whom it is addressed.

FIG. 5.



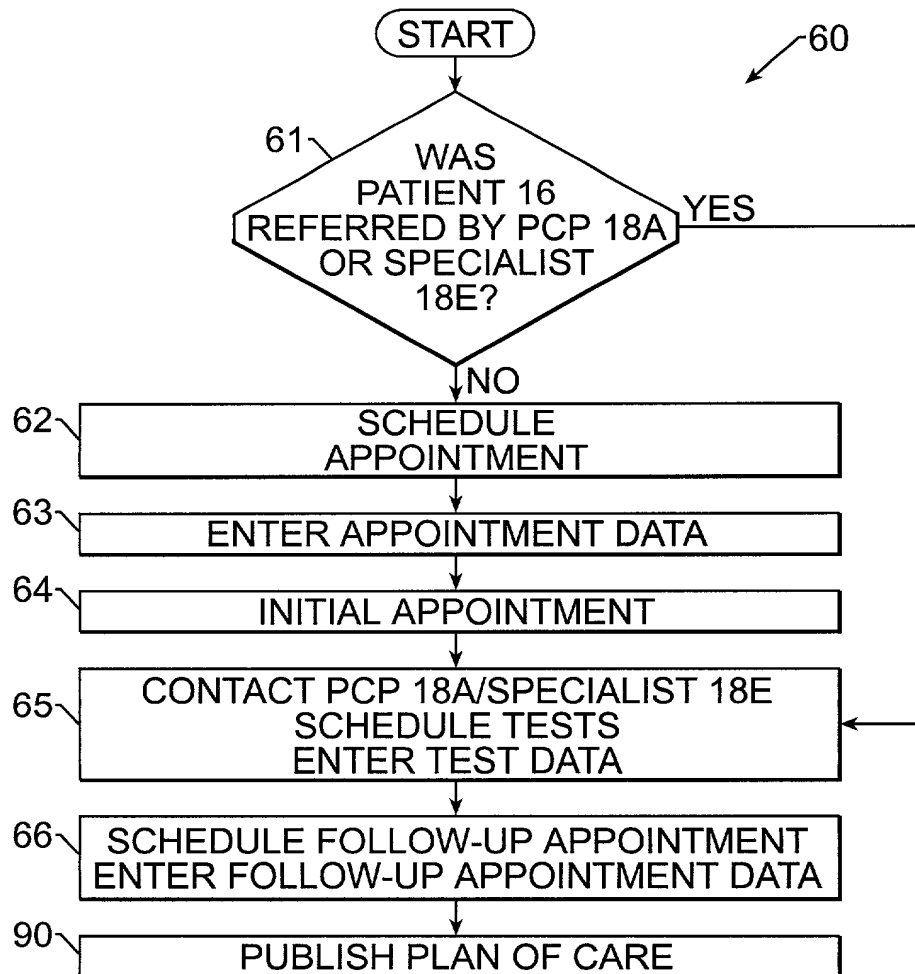


FIG. 7.

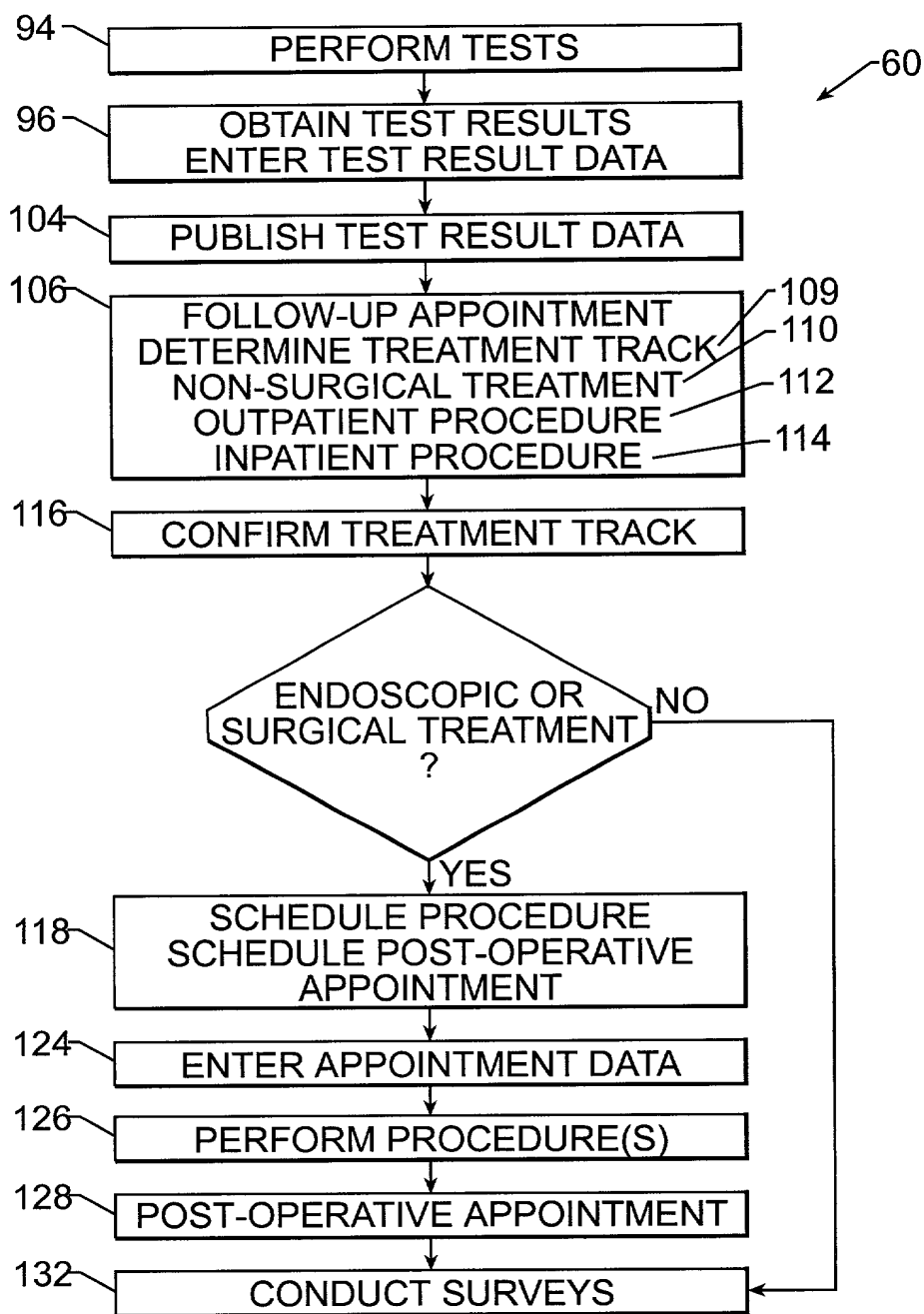


FIG. 8.



FIG. 9.



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## Patient Relationship System

### Appointments

Office Visit: Testing Follow-up

1. What treatment track was selected?

Appointment Date: 06/30/2001

Appointment Time: [ ]

Appointment's With: Adams, Joe

Notes: [ ]

Results Interpreted by: [ ]

Interpretation Date: [ ]

Interpretation Time: [ ]

Data Entry for [ ]

This Appointment is [ ]

Patient	Date	Appointment Type	With	Data Entry
Dough, John	05/01/2002	Test: Gallbladder Ultrasound	Castle, Frank	Incomplete
Smith, Sally	08/30/2001	Office Visit: Testing Follow-up	Adams, Joe	Incomplete

68

70

120

72

FIG. 10.

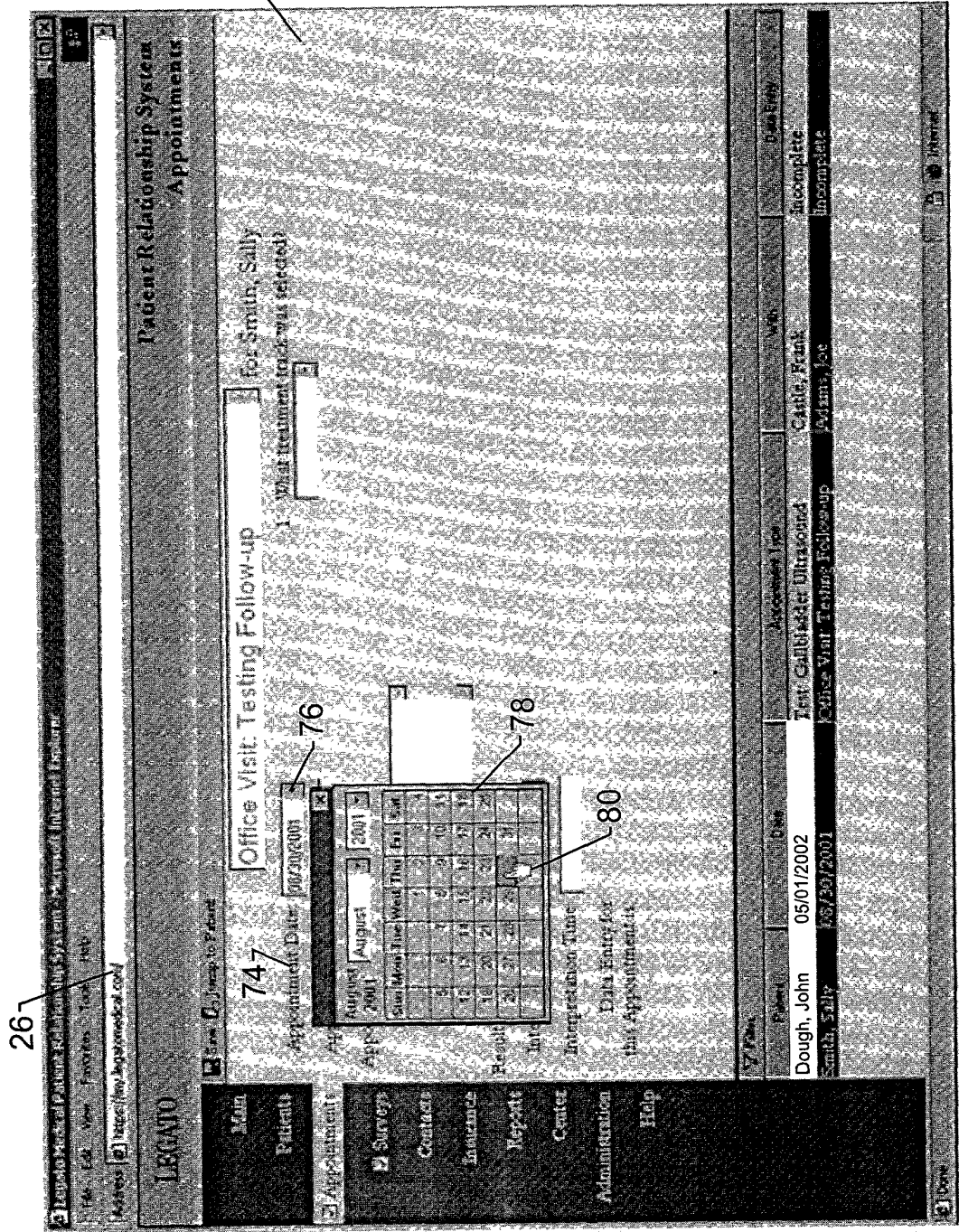


FIG. 11.

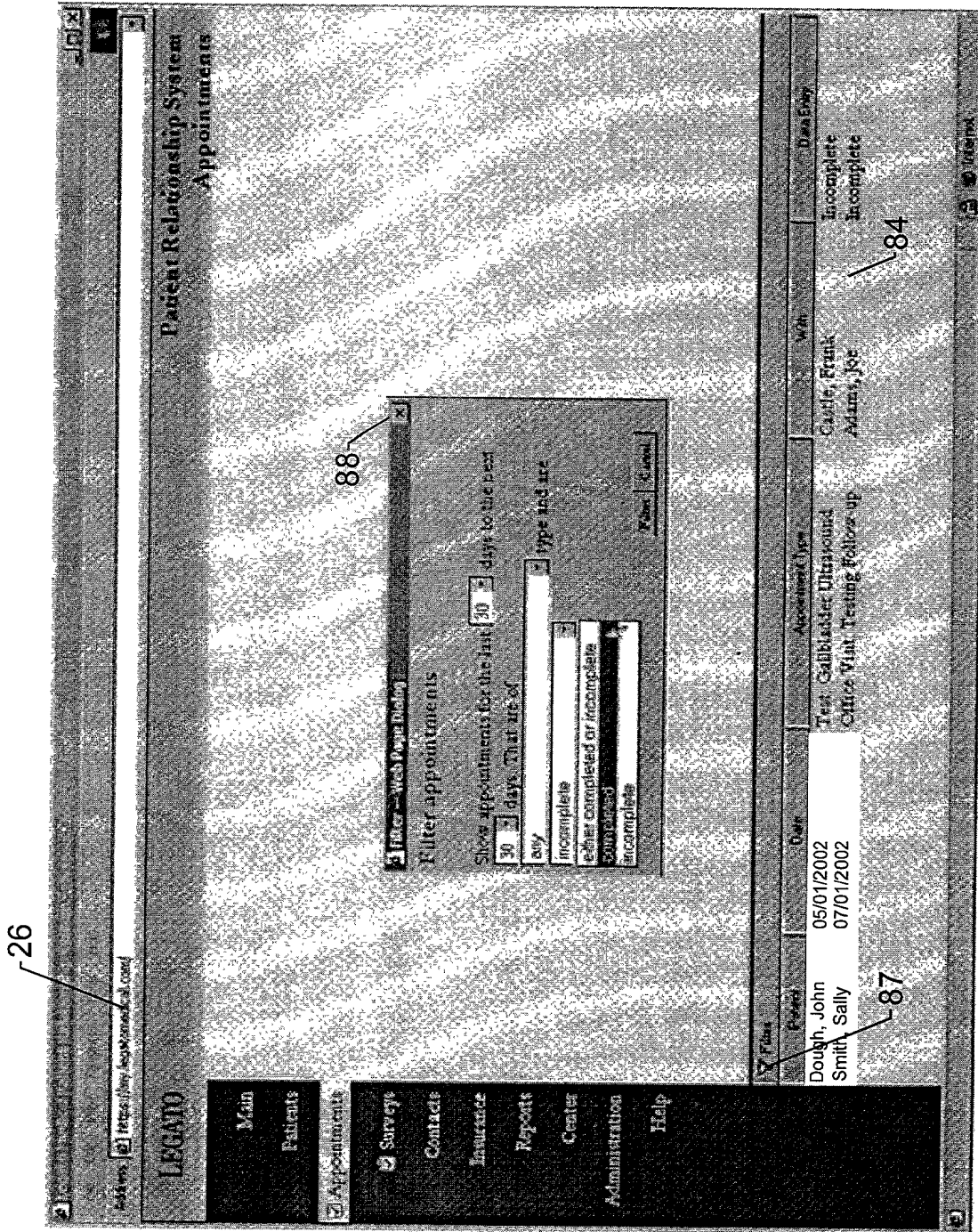


FIG. 12.

10027073-12001

92A

## Plan of Care - Patient Version

### Patient:

J Smith  
1111 Xyz Drive  
Nowhere, NC 00001  
Home Phone: (704)111-2222  
Work Phone: (704)111-1222  
eMail: jsmith@nowhere.com  
DOS: 01/01/67  
SSN: 100-10-1000

Your physician has suggested you have a diagnostic evaluation for Gastroesophageal Reflux Disease. The evaluation will consist of several procedures scheduled on different days. Your schedule of tests is listed below with the date, time, and place of each procedure. Please call the nurse coordinator if you have any questions about this information along the way.

Thank you for allowing us to participate in your healthcare!

---

### Pre-Testing Office Visit

Date of Procedure: 11/02/2001  
Time of Procedure: 1:30AM  
Arrival time for patient: 1:30AM  
Place of Procedure: Doctor's Office  
1701 Sunset Avenue  
Suite 401  
Rocky Mount, NC 27804  
Performed by: Chris Dengler, Dr

---

### Endoscopy

Date of Procedure: 11/16/2001  
Time of Procedure: 8:00AM  
Arrival time for patient: 7:00AM  
Place of Procedure: Nash Day Hospital-Endoscopy Suite  
2420 Curtis Ellis Drive  
Rocky Mount, NC  
Beside Nash General Hospital  
Performed by: Robert Scheilenberg, Dr

FIG. 13A.

10027073 122001  
T0027 122001

92A

Have nothing to eat or drink after midnight the night prior to the procedure.

This is the procedure that allows visualization of the esophagus and the stomach with a small flexible scope which is passed through the mouth.

You will be given a sedative to help you relax during this procedure. For this reason you must have someone to drive you home after the procedure.

Dentures or partial plates are removed before the procedure.

---

### Esophageal Manometry

Date of Procedure: 11/19/2001  
Time of Procedure: 10:00AM  
Arrival time for patient: 9:45AM  
Place of Procedure: Heartburn Center  
Performed by: Nurse

This is the procedure that measures the pressures of the esophagus or swallowing tube. It will be performed by the nurse coordinator at the heartburn treatment center.

Have nothing to eat or drink after for six hours prior to the procedure.

Wear comfortable clothes with a button down shirt.

You may resume regular diet and activity following the procedure.

---

### 24 Hour Ambulatory pH Monitoring

Date of Procedure: 11/19/2001  
Time of Procedure: 10:00AM  
Arrival time for patient: 9:45AM  
Place of Procedure: Heartburn Center  
Performed by: Nurse

The priority instruction is to stop taking your GERD medications one week prior to this procedure. You may take topical over the counter preparations such as Maalox, Mylanta, Tums, Rolaids. DO NOT TAKE PEPCID, TAGAMET, PRILOSEC, PREVACID, PROTONIX, ACIPHEX, OR NEXIUM FOR ONE WEEK PRIOR TO THE PROCEDURE.

Wear comfortable clothing for the procedure.

Do not eat or drink for six hours prior to the procedure.

This is the procedure that records the acid exposure to the esophagus in a 24 hour

FIG. 13B.

10027073 "123001  
FOOEEF" E202001

92B  
↙

**Plan of Care - MD Version**

**Patient:**  
J Smith  
1111 Xyz Drive  
Nowhere, NC 00001  
Home Phone: (704) 111-2222  
Work Phone: (704) 111-1222  
eMail: jsmith@nowhere.com  
DOB: 01/01/67  
SSN: 100-10-1000

**Prepared for:**  
Clifford Baggett

---

Thank you for your referral of J Smith to the Marketing Heartburn Treatment Center. One of our goals is to keep you, the referring physician, informed on all of the patient activity with the heartburn treatment center. Your patient has been scheduled for the procedures and studies listed below.

This is for your information and does not require any action. You will be informed of the results of these studies, however, if you have any questions or concerns please call the heartburn treatment center nurse coordinator, Anita Odom, at (252) 972-3393.

<b>Endoscopy</b> 11/16/2001 8:00AM	<b>With:</b> Robert Schellenberg P.O. Box 7200 Rocky Mount, NC 27804 Work Phone: 972-0236 eMail: rks@boicewillis.com
<b>Esophageal Manometry</b> 11/19/2001 10:00AM	<b>With:</b> Nurse Coordinator Work Phone: (252)972-3393 FAX: (252)972-2581 eMail: eodom@legatomedical.com
<b>24 Hour Ambulatory pH Monitoring</b> 11/19/2001 10:00AM	<b>With:</b> Nurse Coordinator Work Phone: (252)972-3393 FAX: (252)972-2581 eMail: eodom@legatomedical.com
<b>Upper Gastrointestinal Series</b> 11/21/2001 11:00AM	<b>With:</b> Nash General Hospital x-ray department
<b>Gallbladder Ultrasound</b> 11/21/2001 12:00PM	<b>With:</b> Nurse Coordinator

**FIG. 14A.**

Work Phone: (252)972-3393  
FAX: (252)972-2581  
eMail: eodom@legatomedical.com

92B

This patient has not yet been scheduled for a follow up appointment.

The above information, as all information with the heartburn treatment center, is considered privileged and confidential. It is intended solely for the use of the individual to whom it is addressed.

FIG. 14B.



## Test Results

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### Patient:

J Smith  
1111 Xyz Drive  
Nowhere, NC 00001  
Home Phone: (704) 111-2222  
Work Phone: (704) 111-1222  
eMail: jsmith@nowhere.com  
DOB: 01/01/67  
SSN: 100-10-1000

### Prepared for:

Geraldine Hunter  
1010 Professional Drive  
Rocky Mount, NC 27804  
Work Phone: (252)927-0234  
FAX: (252)001-1010  
eMail: GHUNTER@professionaldoc.com

A report on the tests your patient has undergone with the Heartburn Treatment Center is listed below for your information. If you have any questions or concerns please call the nurse coordinator Anita Odom at (252)972-3393.

This brief summary is provided solely as a convenience to you. If you are the treating physician, this summary should in no way and under no circumstances substitute for your thorough review of the individual test reports summarized herein. You alone remain legally and ethically responsible for the care of your patients.

<b>Endoscopy</b> 07/05/2001 8:00AM Performed by: Robert Schellenberg, Dr	Grade I(mild),(single erosion) esophagitis was seen on endoscopy. No evidence of Barretts esophagus was seen. Biopsies were not taken. The hiatal hernia was estimated to be 2-5cm in size.
<b>Esophageal Manometry</b> 07/10/2001 8:00AM Performed by: Nurse	Location of the upper border of the Lower Esophageal Sphincter (cm from naras) less than 35 cm. Average resting LES pressure less than 10 mmHg. Length of LES-1cm LES relaxation percentage on wet swallows 80-90%. The esophageal body contractions were generally peristaltic in character. The overall diagnostic impression is Normal.

FIG. 15A.



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24 Hour Ambulatory pH Monitoring 07/10/2001 8:00AM Performed by: Nurse	Data Entry on this test has not been completed.
Upper Gastrointestinal Series	This study was not requested by the referring physician.
Gallbladder Ultrasound	This study was not requested by the referring physician.

The above information, as all information with the heartburn treatment center, is considered privileged and confidential. It is intended solely for the use of the individual to whom it is addressed.

FIG. 15B.

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Menu: Patients Appointments Surveys Contacts Insurance Reports Center Administration Help

View Jump to Patient

Office Visit: Testing Follow-up

for Smith, Sally

1. What treatment list is selected?

Appointment Date: 08/30/2001

Appointment Time:

Appointment is With: Ador

Notes:

Results Interpreted by: n/a

Interpretation Date:

Interpretation Time:

Date Entry/ix: 08/30/2001

this Appointment is:

Web Page Follow

Warning

The information displayed has been changed. If you do not have those changes will be lost.

Would you like to save your changes before you continue?

Yes No

Appointment Type: Test: Gallbladder Ultrasound

Web: Castle, Frank

Deleted:

Appointment Type: Office Visit: Testing Follow-up

Web: Adams, Joe

Deleted:

Smith, John

08/30/2001

Test: Gallbladder Ultrasound

Castle, Frank

Incomplete

Smith, Sally

08/30/2001

Office Visit: Testing Follow-up

Adams, Joe

Incomplete

Address: <http://www.legatomedical.com>

View Jump to Patient

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FIG. 16.

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### Patient Relationship System

#### Appointments

☒ Save ☒ Query to Patient

**Endoscopy**

Appointment Date: 10/01/2001

Appointment Time: 1:00AM

Appointment is With: Castle, Frank

Appointment Location: Prepup

Notes: next to last  
user notes on x

Results Interpreted by: n/a

Data Entry for this Appointment is: Incomplete

1. Was esophagus seen?

2. If present, how severe was the esophagitis?

3. Was Barrett's esophagus suspected previously?

4. Were esophageal biopsies taken?

5. If esophageal biopsies were taken what were the pathology results?

Patient	Date	Time	Ap	Ref	Ref	Ref
Dough, Joseph	10/01/2001	1:00AM	Endoscopy	Castle, Frank	Castle, Frank	Incomplete
Dough, Joseph	09/26/2001	11:00AM	Testing Follow	Dangler, William	Dangler, William	Incomplete
Dough, Joseph	09/13/2001	1:00PM	Therapeutic EC	Castle, Frank	Castle, Frank	Incomplete
Smith, Sally	08/30/2001	2:00PM	Testing Follow-up	Adams, Joe	Adams, Joe	Incomplete

FIG. 17.

26

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**LEGATO**

Survey for Dough, Joseph

Survey Date: 09/05/2001

Survey Time: 11:00 AM

Notes: [Redacted]

Data Entry for Incomplete

Data Entry for this Survey is

Annual Survey for Dough, Joseph

Survey

Menu: Main, Patients, Appointments, Surveys, Contacts, Insurance, Reports, Center, Administration, Help

First Name	Last Name	Date	Status	Survey Type	Survey Date
Dough, Joseph		02/01/2002	Annual	Incomplete	
Smith, Sally		04/01/2002	1-Month	Incomplete	

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FIG. 18.



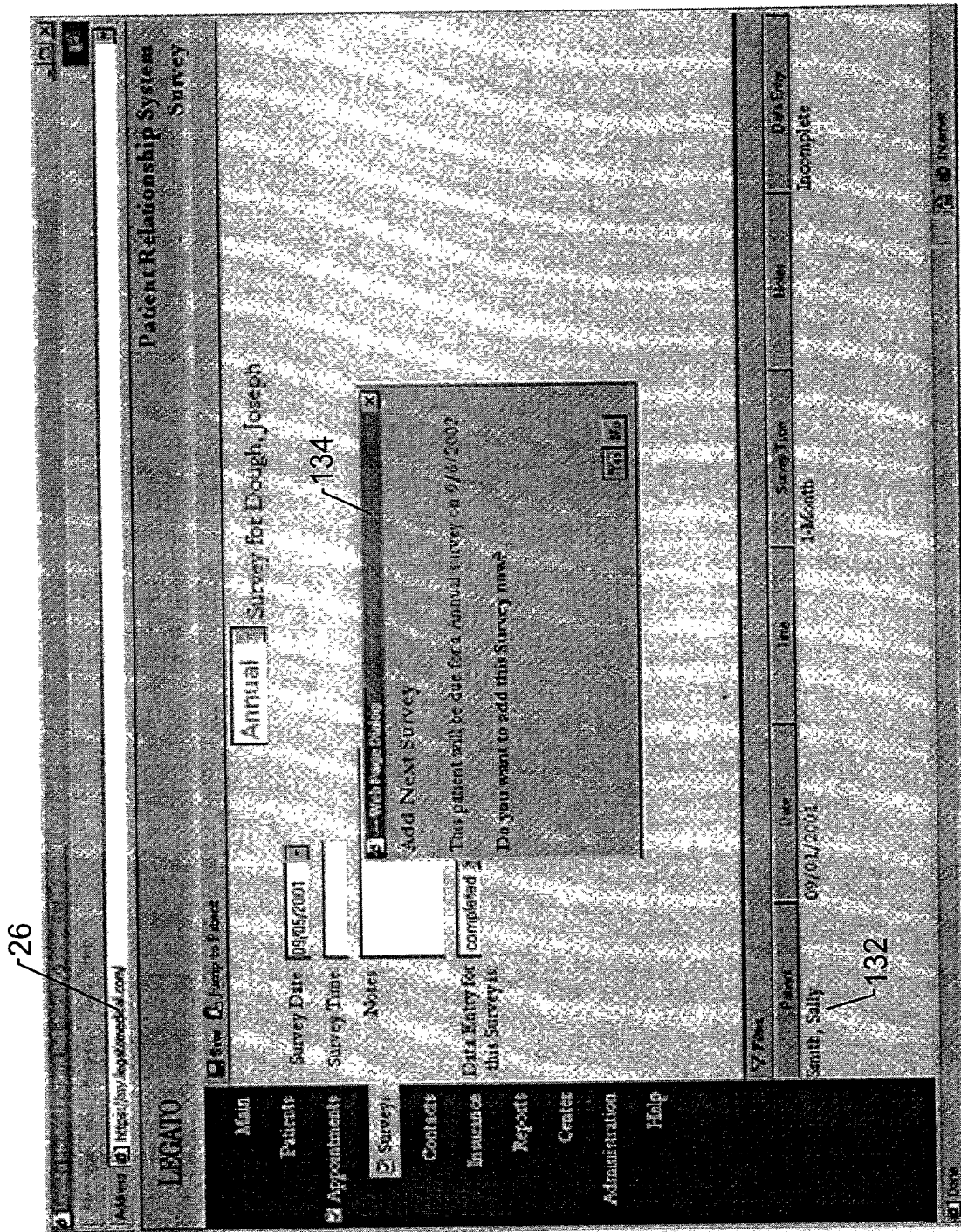


FIG. 19.